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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/589,068
Filing Date	19-Jul-2007
First Named Inventor	Lui, Hui
Art Unit	
Examiner Name	
Attorney Docket Number	12279-162-999

I hereby revoke all previous powers of attorney given in the above-identified application.		
A Power of Attorney is submitted herewith.		
OR ✓ I hereby appoint the practitioners associated w	ith the Customer Number: 26839	
Please change the correspondence address for the above-identified application to: The address associated with		
Customer Number: OR	26839	
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I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		
SIGNATURE of Applicant or Assignee of Record		
Signature × 5500		
Name Paul S. Naik	· · · · · · · · · · · · · · · · · · ·	
Date X 11 19 07	Telephone (650) 225-5530	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		
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